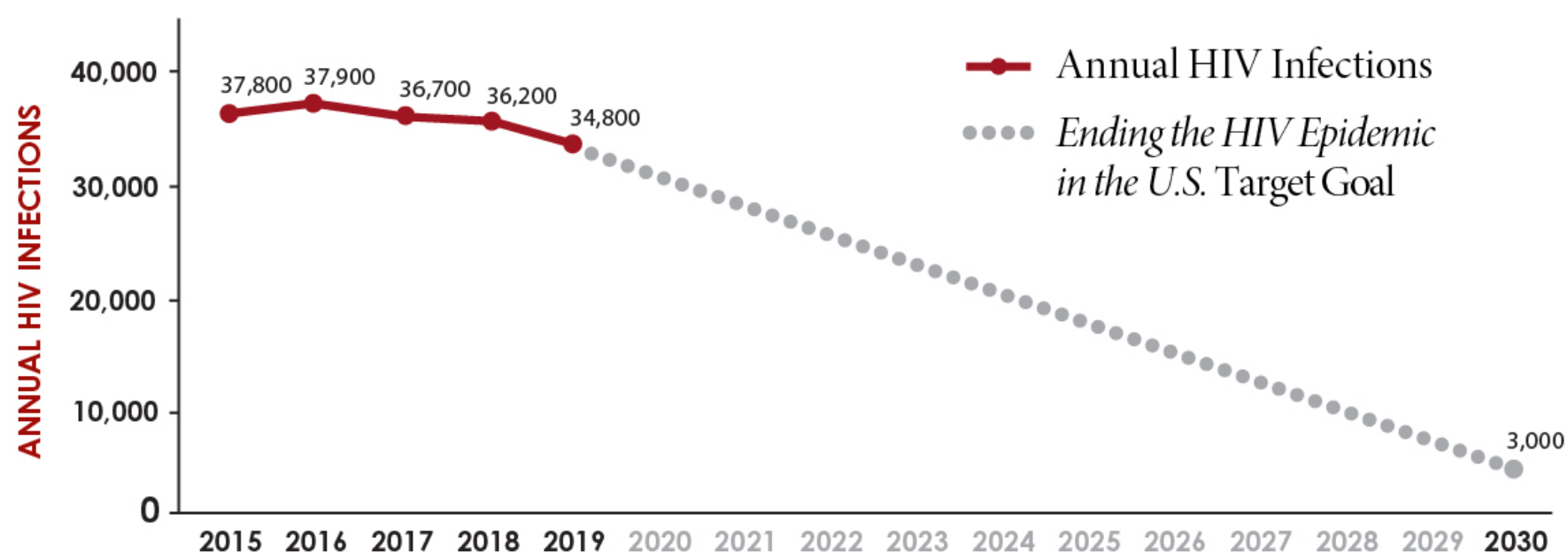


The State of the HIV Epidemic in the U.S.

THERE HAS BEEN RECENT PROGRESS IN HIV PREVENTION, BUT THE IMPACT OF COVID-19 IS UNCERTAIN

NEW HIV INFECTIONS FELL 8% FROM 2015 TO 2019, AFTER A PERIOD OF GENERAL STABILITY

ANNUAL HIV INFECTIONS IN THE U.S., 2015-2019



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U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

Annual HIV Infections in the U.S., 2015-2019

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CDC estimates that, as of 2019, about 1.2 million people in the U.S. have HIV. [New HIV infections](#) have declined in recent years, after a period of general stability. Overall, **new infections fell 8%** from 37,800 in 2015 to 34,800 in 2019.

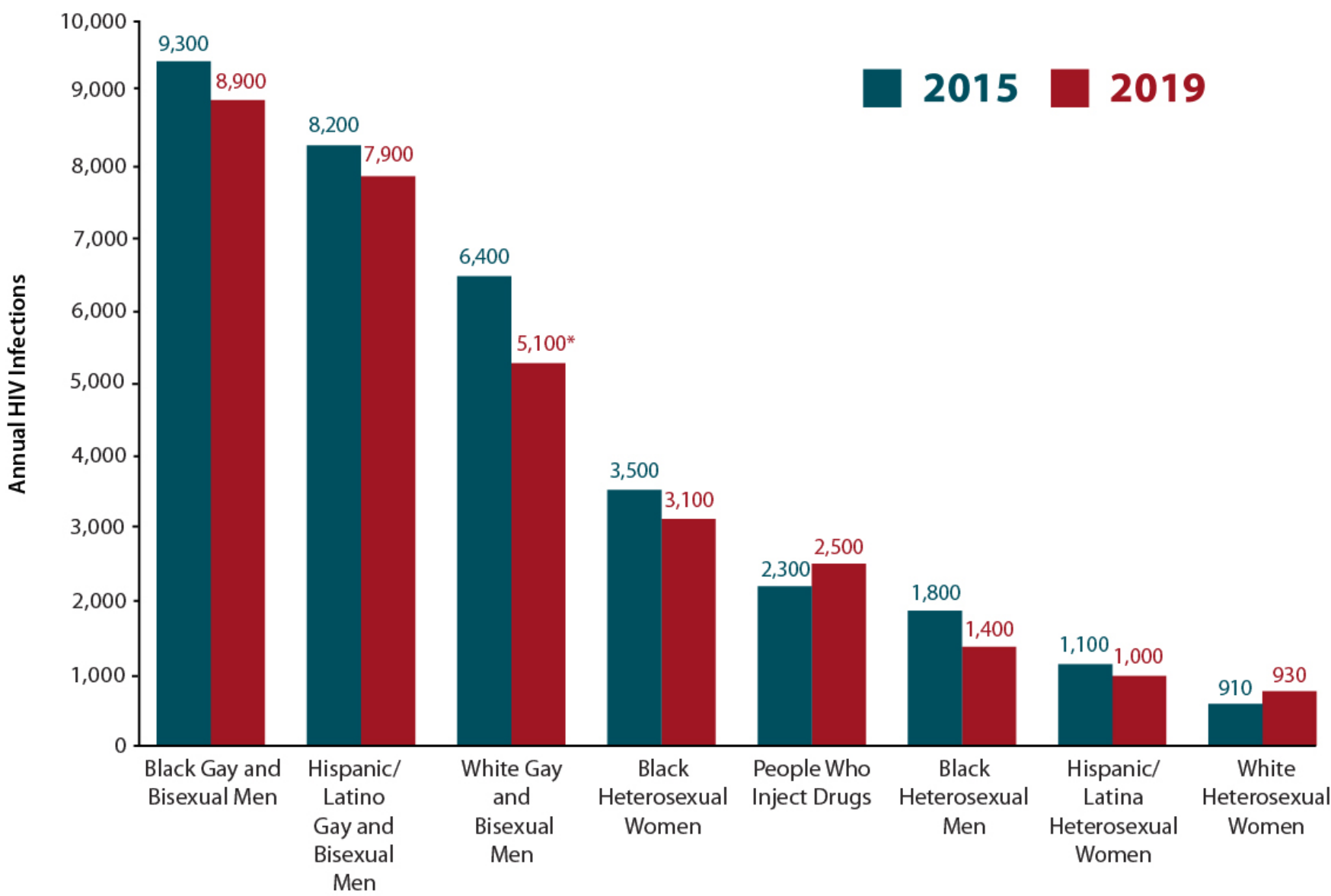
Much of this progress was due to larger declines among young gay and bisexual men (ages 13-24) in recent years. From 2015 to 2019, new infections **dropped 33% overall** among this population.

There have been **hopeful signs of progress in HIV prevention, but gains remain uneven**, and HIV continues to affect some groups severely and disproportionately.

While we do not yet know the full impact of the COVID-19 pandemic on the HIV epidemic in the U.S., data indicate disruptions in key services that could impact progress in HIV prevention. For example, data show significant declines in HIV testing and pre-exposure prophylaxis (PrEP) prescriptions, as well as reduced operation of syringe service programs during the pandemic.

To end the HIV epidemic, it will be crucial to regain momentum in the wake of COVID-19 and address persistent gaps in testing, treatment, and prevention, especially among groups most affected by HIV.

New HIV Infections by Race and Transmission Group, U.S., 2015 vs. 2019



*Indicates that difference from 2015 estimate was deemed statistically significant

For more information, visit cdc.gov/nchhstp/newsroom



Annual HIV Infections in the U.S. by Race and Transmission Group, 2015 vs. 2019

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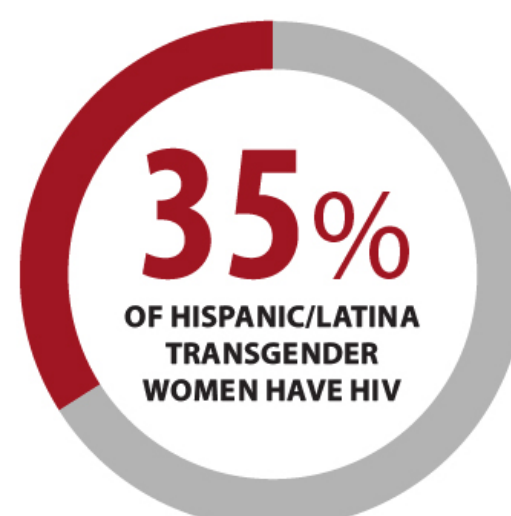
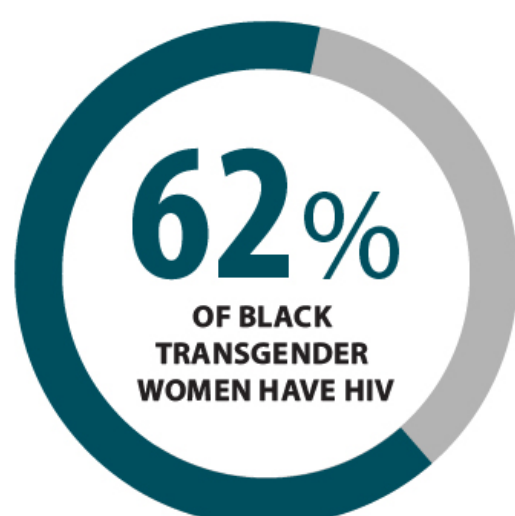
Gay and bisexual men continue to account for most new HIV infections (66%), and disparities in HIV remain severe among some racial and ethnic minority groups. **Black or African American people** (hereafter referred to as Black people) face rates of infection that are **eight times as high as** White people, and **Hispanic/Latino people** face rates that are **almost four times as high**. Hispanic/Latino people can be of any race.

Geographically, the South is also disproportionately affected. The region accounted for **more than half (53%) of new HIV infections** in 2019, even though it only represented 38% of the U.S. population.

CDC has accelerated efforts to reduce health disparities among transgender women and other groups. Transgender women, Black people, and Hispanic/Latino people are key populations for CDC’s major HIV prevention funding programs, including funding to state and local health departments and community-based organizations. The ongoing [Ending the HIV](#)

Epidemic in the U.S. initiative also includes the use or expansion of innovative, community-tailored HIV testing and care strategies for these groups.

A recent CDC study of transgender women in seven major U.S. cities found that...



COMPARED TO JUST 17% OF WHITE TRANSGENDER WOMEN

For more information, visit
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U.S. Department of
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Centers for Disease
Control and Prevention

Proportion of Transgender Women with HIV in 7 U.S. cities by Race/Ethnicity, 2019-2020

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HIV Among Transgender Women

Transgender women urgently need more HIV prevention and treatment services. A [recent CDC study](#) found that **four in 10** transgender women in seven major U.S. cities have HIV. Among this group, there are stark racial and ethnic differences in HIV rates – **nearly two-thirds** of Black transgender women and **over one-third** of Hispanic/Latina transgender women have HIV.

GAINS—AND CHALLENGES—IN HIV PREVENTION AND TREATMENT

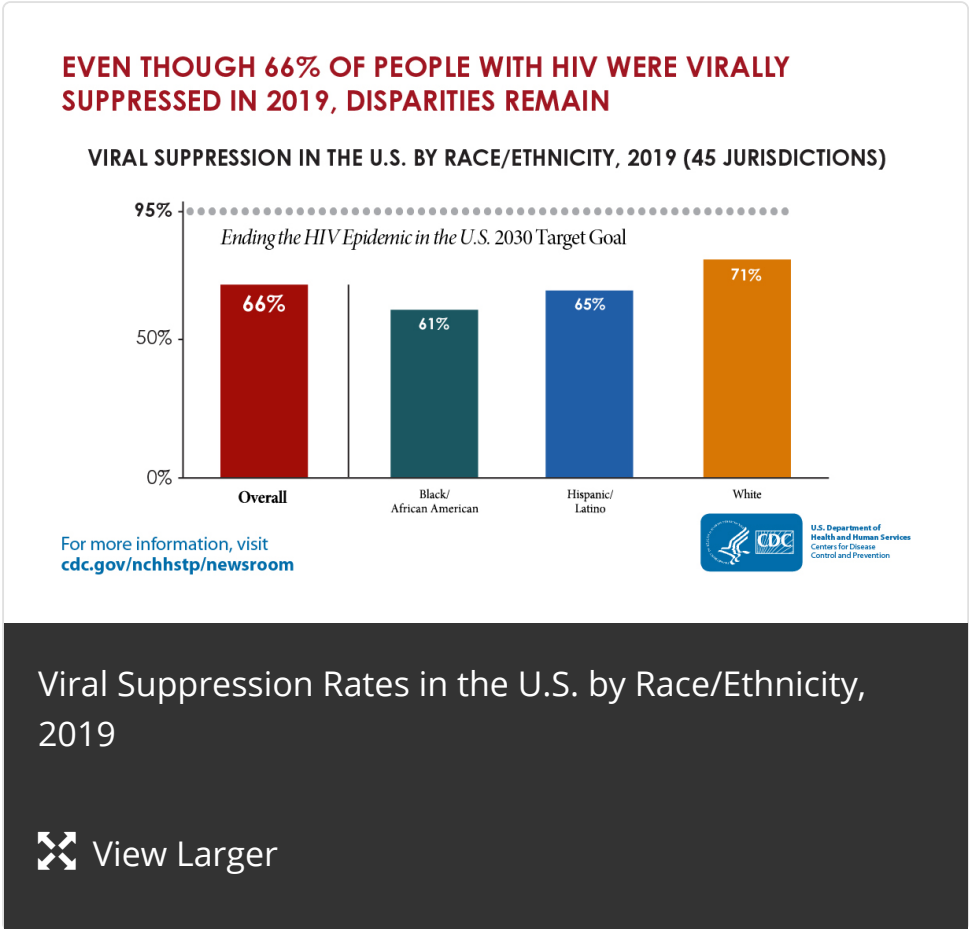
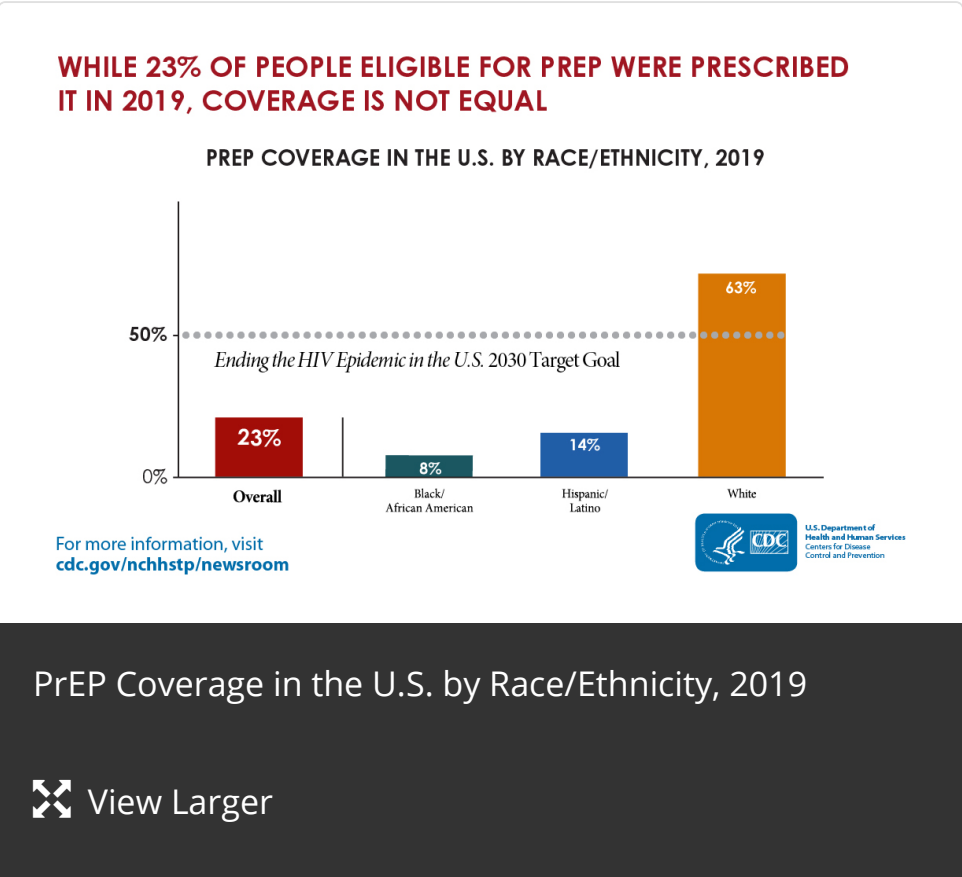
Data suggest that recent declines in HIV infections are likely due to increased uptake of key prevention strategies, such as PrEP and rapid and effective HIV treatment. In 2019:

- **Nearly 23%** of people eligible for PrEP were prescribed it. This represents substantial progress from 2015, when the percentage was **roughly 3%**.
- **66%** of people with diagnosed HIV were virally suppressed, and **81%** were rapidly linked to care within one month of diagnosis in 45 jurisdictions. While not directly comparable due to a differing number of jurisdictions with complete data (38 in 2015 vs. 45 in 2019), a previous CDC report showed that **60%** of people were virally suppressed and **75%** were rapidly linked to care in 2015.

However, approximately 13% of people with HIV in the U.S. still do not know their status, and far too few are receiving adequate HIV care and treatment that will help them live longer, healthier lives and get and keep viral suppression. HIV testing is critical to ending the epidemic because it is the bridge to all HIV treatment and prevention.

Addressing disparities will be crucial

Data show that HIV prevention and treatment services are not reaching many who could benefit the most.



To end the HIV epidemic in the U.S., we must ensure that people eligible for PrEP use it, and that people with HIV are equitably aware of their status, rapidly linked to and retained in care, and get and keep viral suppression.

ENDING THE HIV EPIDEMIC IN THE U.S.

To accelerate progress in HIV prevention, CDC is working with partners through the [Ending the HIV Epidemic in the U.S.](#) initiative to scale up key, science-based strategies in innovative ways. As the nation continues to respond to COVID-19, increasing access to HIV prevention and treatment through EHE remains an urgent priority – as far too many have not yet been reached with the strategies that work. Visit [HIV.gov](https://www.hiv.gov) for more about this federal initiative, and [CDC.gov/endHIV](https://www.cdc.gov/endHIV) for more about CDC’s role in this effort.

If you are a member of the news media and need more information, please visit www.cdc.gov/nchhstp/newsroom or contact the News Media Line at CDC’s National Center for HIV, Viral Hepatitis, STD, and TB Prevention at 404-639-8895 or NCHHSTPMediaTeam@cdc.gov.